



Medicare's Biggest Foe

Obama Is The Only Candidate On The Ballot To Cut Medicare In Battleground States

THE OBAMA CAMPAIGN IS DELIGHTED THAT OBAMA CUT MEDICARE TO FUND OBAMACARE



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Obama Confirmed With ABC's Jake Tapper That One-Third Of ObamaCare Would Be Funded By Cuts To Medicare. ABC's JAKE TAPPER: "One of the concerns about health care and how you pay for it -- one third of the funding comes from cuts to Medicare." OBAMA: "Right." TAPPER: "A lot of times, as you know, what happens in Congress is somebody will do something bold and then Congress, close to election season, will undo it." OBAMA: "Right." TAPPER: "You saw that with the 'doc fix.'" OBAMA: "Right." TAPPER: "Are you willing to pledge that whatever cuts in Medicare are being made to fund health insurance, one third of it, that you will veto anything that tries to undo that?" OBAMA: "Yes. I actually have said that it is important for us to make sure this thing is deficit neutral, without tricks. I said I wouldn't sign a bill that didn't meet that criteria." ([ABC News](#), 11/9/09)

- **Obama Deputy Campaign Manager Stephanie Cutter Bragged About ObamaCare's Cuts To Medicare.** CUTTER: "On top of the savings we've already achieved. You know I heard Mitt Romney deride the \$700 billion cuts in Medicare that the president achieved through health care reform." (CBS' s"[Face The Nation](#)," 8/12/12)

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OBAMACARE CUT MEDICARE BY OVER \$700 BILLION TO FUND OBAMACARE

ObamaCare Cut Medicare By 6 Percent. “If the debt committee hits a dead end, the agreement between President Barack Obama and congressional leaders decrees an automatic 2 percent cut to Medicare providers. That’s on top of a 6 percent cut already enacted to finance the president’s health care law, according to the nonpartisan Kaiser Family Foundation. And the earlier cut is still being phased in.” (“Advocates, Industry Fear Debt Deal Could Open The Way For Big Cuts To Medicare And Medicaid,” [The Associated Press](#), 8/2/11)

The Nonpartisan Congressional Budget Office: ObamaCare Cuts \$716 Billion From Medicare.

(Congressional Budget Office, [Letter To Speaker John Boehner](#), 7/24/12)

- **Over The Next 10 Years, ObamaCare Will Cut \$6.6 Billion From Medicare Plans That Colorado Seniors Rely On For Their Health Care Needs.** (Robert A. Book and Michael Ramlet, “What Is The Regional Impact Of The Medicare Fee-For-Service And Medicare Advantage Payment Reductions,” [University Of Minnesota’s Carlson School Of Management](#), 9/12)
- **Over The Next 10 Years, ObamaCare Will Cut \$44.4 Billion From Medicare Plans That Florida Seniors Rely On For Their Health Care Needs.** (Robert A. Book and Michael Ramlet, “What Is The Regional Impact Of The Medicare Fee-For-Service And Medicare Advantage Payment Reductions,” [University Of Minnesota’s Carlson School Of Management](#), 9/12)
- **Over The Next 10 Years, ObamaCare Will Cut \$5.6 Billion From Medicare Plans That Iowa Seniors Rely On For Their Health Care Needs.** (Robert A. Book and Michael Ramlet, “What Is The Regional Impact Of The Medicare Fee-For-Service And Medicare Advantage Payment Reductions,” [University Of Minnesota’s Carlson School Of Management](#), 9/12)
- **Over The Next 10 Years, ObamaCare Will Cut \$4.1 Billion From Medicare Plans That Nevada Seniors Rely On For Their Health Care Needs.** (Robert A. Book and Michael Ramlet, “What Is The Regional Impact Of The Medicare Fee-For-Service And Medicare Advantage Payment Reductions,” [University Of Minnesota’s Carlson School Of Management](#), 9/12)
- **Over The Next 10 Years, ObamaCare Will Cut \$2.2 Billion From Medicare Plans That New Hampshire Seniors Rely On For Their Health Care Needs.** (Robert A. Book and Michael Ramlet, “What Is The Regional Impact Of The Medicare Fee-For-Service And Medicare Advantage Payment Reductions,” [University Of Minnesota’s Carlson School Of Management](#), 9/12)
- **Over The Next 10 Years, ObamaCare Will Cut \$16 Billion From Medicare Plans That North Carolina Seniors Rely On For Their Health Care Needs.** (Robert A. Book and Michael Ramlet, “What Is The Regional Impact Of The Medicare Fee-For-Service And Medicare Advantage Payment Reductions,” [University Of Minnesota’s Carlson School Of Management](#), 9/12)
- **Over The Next 10 Years, ObamaCare Will Cut \$21 Billion From Medicare Plans That Ohio Seniors Rely On For Their Health Care Needs.** (Robert A. Book and Michael Ramlet, “What Is The Regional Impact Of The Medicare Fee-For-Service And Medicare Advantage Payment Reductions,” [University Of Minnesota’s Carlson School Of Management](#), 9/12)
- **Over The Next 10 Years, ObamaCare Will Cut \$9.4 Billion From Medicare Plans That Wisconsin Seniors Rely On For Their Health Care Needs.** (Robert A. Book and Michael Ramlet, “What Is The Regional Impact Of The Medicare Fee-For-Service And Medicare Advantage Payment Reductions,” [University Of Minnesota’s Carlson School Of Management](#), 9/12)

Obama Created The Independent Payment Advisory Board (IPAB) Which Is Tasked With Making Even More Cuts To Medicare

ObamaCare Created IPAB “To Cut Medicare.” “That’s the job description for the 15 members of the Independent Payment Advisory Board — the new panel created by President Barack Obama’s health care

law to come up with ways to cut Medicare spending if it grows too fast.” (David Nather, “Medicare Cost-Cutting Job Could Be Worst In D.C.,” [Politico](#), 5/14/11)

- **Obama Has Continually Pushed For Strengthening IPAB And An Additional \$248 Billion Cut From Medicare.** “The plan calls for strengthening a controversial piece of the health care reform law, and it includes proposals state governments have strongly opposed. It also would require seniors to pay more for certain Medicare benefits, according to a summary of the proposal, which would cut \$248 billion in Medicare funding and \$73 billion to Medicaid and other health programs.” (Sam Baker, “Obama Health Cuts To Spark Fights With States, GOP, Industry Groups,” *The Hill’s “Health Watch,”* 9/19/11)
- **The Nonpartisan Congressional Budget Office Found That IPAB Will Be Required To Recommend Changes To Medicare Spending.** “The legislation also would establish an Independent Payment Advisory Board, which would be required, under certain circumstances, to recommend changes to the Medicare program to limit the rate of growth in that program’s spending.” (Congressional Budget Office, [Letter To Majority Leader Harry Reid](#), 12/19/09)

If Congress Fails To Act On IPAB’s Recommendations, HHS Is Required To Implement IPAB’s Cuts To Medicare. “If Congress fails to act, the secretary of health and human services is required to implement the cuts.” (Bara Vaida, “The IPAB: The Center Of A Political Clash Over How To Change Medicare,” [Kaiser Health News](#), 3/22/12)

OBAMA’S CUTS TO MEDICARE ARE UNSUSTAINABLE OVER TIME

The Non-Partisan Congressional Budget Office (CBO): Obama’s Medicare Payment Cuts To Physicians And Providers May “Be Difficult To Sustain” Over The Long Term. “For Medicare, CBO assumed that three policies that would restrain cost growth might be difficult to sustain over a long period—ongoing reductions in payment updates for most providers in the fee-for-service program, the sustainable growth rate mechanism for payment rates for physicians, and the IPAB—would not continue.” (Congressional Budget Office, “[The Long-Term Budget Outlook](#),” June 2012, p. 57)

Medicare Actuary Richard Foster On ObamaCare’s Medicare Cuts: “It’s Pretty Hard To Imagine That They Could Be Sustainable.” FOSTER: “And the figures you quoted were correct. And that assumes that again, the private health insurance can’t do something comparable to these mandated reductions in growth rates that are part of current law now for Medicare. In looking at those, it’s pretty hard to imagine that they could be sustainable, because when you think about it, the providers have to pay certain input cost increases. They have to pay somewhat more next year than they do this year. They have to pay higher energy costs. They have medical supplies. They have rent or leases that go up.” ([Testimony Before The House Committee On The Budget](#), U.S. House Of Representatives,, 7/13/11)

- **Foster:** “But there is a lot of evidence that suggests some of these payment provisions will not be sustainable in the long range.” ([Testimony Before The House Committee On The Budget](#), U.S. House Of Representatives, 7/13/11)

Obama’s Medicare Cuts Will Endanger Seniors’ Access To Health Care

Medicare Payment Cuts “Could Jeopardize Medicare Beneficiaries’ Access To Mainstream Medical Care.” “...it is equally hard to imagine cutting only Medicare spending while spending by the commercially insured under age sixty-five continues to grow at historic rates, which would lead to a marked divergence between what providers are paid for treating the commercially insured relative to what they are paid for Medicare beneficiaries. This gap could jeopardize Medicare beneficiaries’ access to mainstream medical care.” (Newhouse, Joseph P. (July 22, 2010) “Assessing Health Reform’s Impact on Four Key Groups of Americans,” *Health Affairs* 29:9, pp. 1-11)

- **Rep. Pete Stark (D-CA): Setting Low Payment Rates “Could Endanger Patient Care.”** REP. STARK: “But, in its effort to limit the growth of Medicare spending, the board is likely to set inadequate payment rates for health care providers, which could endanger patient care.” (Robert Pear, “Obama Panel to Curb Medicare Finds Foes In Both Parties,” [The New York Times](#), 4/19/11)
- **Rep. Allyson Schwartz (D-PA): “We Cannot Impose A Financial Burden On Patients And Providers To Conceal Inherent Flaws In Our Health Care System Through Arbitrary Cuts.”** (Press Release, “Schwartz: IPAB Is The Wrong Path Toward Medicare Payment Reform,” [U.S. Representative Allyson Schwartz](#), 4/15/11)

ObamaCare’s Medicare Cuts Are Forcing Private Physicians To Turn Away New Patients. “Doctors on the panel also warned that PPACA’s \$500 billion cut to Medicare could translate into even less reimbursement for those who care for patients insured by the government. Already, many physicians are turning away new patients because they’re taking a loss or barely breaking even when working with Medicare.” (J.D. Harrison, “Health Care Law Driving Doctors Away From Small Practices, Toward Hospital Employment,” [The Washington Post](#), 7/19/12)